FORM D

UNITED STATES 19 485 7 SECURITIES AND EXCHANGE COMMISSION Section

ngton, D.C. 20549
FORM D

NOTICE OF SALE OF SECURITIES 27 2008
PURSUANT TO REGULATION D,

SECTION 4(6) AND/OR vvasnington, DC
UNIFORM LIMITED OFFERING EXEMPTION

OMB API	PROVAL
OMB NUMBER:	3235-0076
Expires:	April 30, 2008
Estimated average	burden
hours per response	16.00
, ,	

	SEC US	E ONLY
refix		Serial
		1
	<u>i</u>	1
	Date Re	ceived
		l l

Name of Offering (☐ check if this is an	amendment and name has changed, and	d indicate change.)	
Filing Under (Check box(es) that apply): Type of Filing: New Filing A	☐ Rule 504 ☐ Rule 505 ☒ R mendment	ule 506) □ ULOE
	A. BASIC IDENTIFICATION	ON DATA	
1. Enter the information requested about th	e issuer		
Name of Issuer (Check if this is an am Campus Management Acquisition Corp.	endment and name has changed, and in	dicate change.)	
Address of Executive Offices 350 Park Avenue, 23rd Floor, New York, N	(Number and Street, City, S Y 10022	tate, Zip Code) Telepho (212) 83	ne Number (Including Area Code) 5-2000
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, S PROCESSED	tate, Zip Code) Telepho	ne Number (Including Area Code)
Brief Description of Business Holding Company	MAR 0 3 2008 THOMSON FINANCIAL		A COLONIA STALLONIA
Type of Business Organization ☐ corporation ☐ business trust	☐ limited partnership, already formed☐ limited partnership, to be formed	other (pleas	08041441
Actual or Estimated Date of Incorporation of Jurisdiction of Incorporation or Organization	-	0 7 e abbreviation for State:	Actual Estimated D E

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: □ Promoter ■ Beneficial Owner □ Executive Officer ☐ Director □ General and/or **Managing Partner** Full Name (Last name first, if individual) LEEDS EQUITY PARTNERS IV, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Leeds Equity Partners, LLC, 350 Park Avenue, 23rd Floor, New York, NY 10022 □ General and/or Check Box(es) that Apply: □ Executive Officer □ Director □ Promoter ■ Beneficial Owner Managing Partner Full Name (Last name first, if individual) ARES CAPITAL CORPORATION Business or Residence Address (Number and Street, City, State, Zip Code) 280 Park Avenue, 22nd Floor, New York, NY 10017 □ General and/or Check Box(es) that Apply: □ Promoter □ Beneficial Owner ■ Executive Officer ☑ Director Managing Partner Full Name (Last name first, if individual) Bernstein, Robert **Business or Residence Address** (Number and Street, City, State, Zip Code) 350 Park Avenue, 23rd Floor, New York, NY 10022 □ General and/or Check Box(es) that Apply: □ Promoter □ Beneficial Owner ■ Executive Officer □ Director Managing Partner Full Name (Last name first, if individual) Whitman, Bradley Business or Residence Address (Number and Street, City, State, Zip Code) 350 Park Avenue, 23rd Floor, New York, NY 10022 Check Box(es) that Apply: ☐ General and/or □ Beneficial Owner ☐ Executive Officer □ Promoter Managing Partner Full Name (Last name first, if individual) Gilani, Atif Business or Residence Address (Number and Street, City, State, Zip Code) 350 Park Avenue, 23rd Floor, New York, NY 10022 Beneficial Owner Check Box(es) that Apply: ☐ Executive Officer Director □ General and/or Managing Partner Full Name (Last name first, if individual)

(Number and Street, City, State, Zip Code)

Beneficial Owner

(Number and Street, City, State, Zip Code)

☐ Executive Officer

Director
 Director

□ General and/or

Managing Partner

Loomer, Tim

Business or Residence Address

Business or Residence Address

Check Box(es) that Apply:

Everhart, Rodney

777 Yamato Road, Boca Raton, FL 33431

Full Name (Last name first, if individual)

20 Forest View Drive, Chester, NJ 07930

□ Promoter

				B. INF	ORMATIC	ON ABOU	T OFFERI	NG				
1. Has the is:	suer sold o	r does the is	suer intend	to sell to	non accredi	ted investor	re in this of	ferina?				No ⊠
1. 1143 the 13.	3aci 30ia, 0	i does are is						_			_	
					Appendix,		•					
2. What is th		investment retion of the		e accepted	from any in	dividual?					\$ <u>*</u>	
Subject	to the disci	retion of the	issuei								Yes	No
3. Does the o	offering per	mit joint ov	nership of	a single un	it?						⊠	0
4. Enter the iremuneration agent of a bropersons to be Full Name (L.	for solicita ker or deal listed are a	tion of pure er registered ssociated p	hasers in co d with the S ersons of su	onnection v SEC and/or	vith sales of with a state	Securities or states, 1	in the offer ist the name	ing. If a per cof the brol	rson to be li cer or deale	isted is an r. If more	associated than five	l person or
Business or R	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						
Name of Asse	ociated Bro	ker or Deal	er									
States in Whi	ah Daman I	istad Use C	Calinitad on	latonda to	Saliait Duan	haam				·····		
					Solicit Fuic				*************		All State	:S
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(IL) (MT)	[IN] [NE]	[IA] [NV]	(KS) (NH)	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA]	[MI]	[MN]	[MS]	[MO]
[RI]	[SC]	[SD]	(TN)	[XT]	[UT]	[VT]	[VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
Full Name (L	ast name fi	rst, if indivi	dual)					:				
Business or R	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						
Name of Asso	ociated Bro	ker or Deale	er									
States in Whi												
(Check ". [AL]	All States" [AK]	or check ind [AZ]		,							All State	
[IL]	[IN]	[IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[ОН]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L	ast name fi	rst, if indivi	dual)									
Business or R	Lesidence A	ddress (Nu	nber and S	treet, City,	State, Zip C	Code)						
Name of Asso	ociated Bro	ker or Deale	er									
		 -										
States in Whi (Check "A					Solicit Pure		**********				All State	s
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] (RI)	[NE]	[NV] [SD]	[NH] ITNI	[NJ] (TX)	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	(PA)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$	\$
Equity	\$	\$
□ Common □ Preferred		
Convertible Securities (including warrants): issuance of 2,571,536 shares of Convertible Preferre Stock, \$0.001 par value per share at a purchase price of \$18.15277 per share		55 \$ <u>12,552,500</u>
Partnership Interests	\$	\$
Other (Specify)	\$	\$
Total		\$
Answer also in Appendix, Column 3, if filing under ULOE.		
Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchasen the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dollar Amoun of Purchases
Accredited Investors	<u>19</u>	\$ <u>12,552,500</u>
Non-accredited Investors		\$
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under ULOE.		
If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
Type of offering	Type of Security	Dollar Amoun Sold
Rule 505		e
Regulation A		\$
Rule 504	.,	\$
Total	. <u> </u>	\$
a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issue. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees		□ \$
Printing and Engraving Costs	,	o \$
Legal Fees		■ \$ 10,000
Accounting Fees		□ \$
Engineering Fees	!	
Sales Commissions (specify finders' fees separately)		<u> </u>
Other Expenses (identify)		
Total		□ \$

	C. OFFERING PR	IICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF P	ROCEEDS		
5. ı	I and total expenses furnished in resp "adjusted gross proceeds to the issue: Indicate below the amount of the adjust used for each of the purposes shown. If	regate offering price given in response to Part C - Question conse to Part C - Question 4.a. This difference is the" ed gross proceeds to the issuer used or proposed to be the amount for any purpose is not known, furnish an			\$ <u>4</u>	<u>6.670.501.55</u>
		the estimate. The total of the payments listed must equal set forth in response to Part C - Question 4.b above.				
				Payments to Officers, Directors, & Affiliates	:	Payments To Others
	Salaries and fees		×	s+	0	s
	Purchase of real estate			s		
	Purchase, rental or leasing and insta	llation of machinery and equipment		s		
	Construction or leasing of plant bui	ldings and facilities		s		
	offering that may be used in exchan	luding the value of securities involved in this ge for the assets or securities of another		\$		
	, ,			s		
	. ,			s		
				\$		
	Other (specify).			<u> </u>	Ü	٠
			п	s		\$
				\$_*		
	Column Tolais Manna.		-	<u> </u>	-	
	Total Payments Listed (Column total	ıls added)		⊠ \$_	46.6	70.501.55
_		D. FEDERAL SIGNATURE				
_					_	
í	ollowing signature constitutes an under	signed by the undersigned duly authorized person. If this not taking by the issuer to furnish to the U.S. Securities and Excha the issuer to any non-accredited investor pursuant to paragrap	inge C	ommission, up		
ssi	er (Print or Type)	Signature	Ī	Date		
aı	npus Management Acquisition Corp.	My?. When		2/2	4	08
lar	ne of Signer (Print or Type)	Title of Signer (Print or Type)		•	_	

- * The Service Provider will receive a management fee equal to \$450,000 per annum, payable in advance in quarterly installments on the first day of each April, July, October and January (the "Management Fee")
- ** Adjusted Gross Proceeds to the Issuer minus the Management Fee

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

